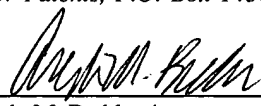


RCE #
for

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

I hereby certify that this correspondence is being deposited with the U.S. Postal Service as first class mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on February 15, 2005.


Angela M. Beddawi

Application Number	:	09/692,747	Confirmation No. 7075
Filing Date	:	October 18, 2000	
Inventor(s)	:	Craig L. Ogg, et al.	
Title	:	MACHINE DEPENDENT LOGIN FOR ON-LINE VALUE-BEARING ITEM SYSTEM	
Group Art Unit	:	3621	
Examiner Name	:	Calvin L. Hewitt II	
Docket No.	:	39478/SAH/S850	Date: February 15, 2005

MAIL TO: Mail Stop RCE

This is a Request for Continued Examination (RCE) under 37 CFR § 1.114 of the above-identified application.

This application is **not** an application of the kind specified in 37 CFR § 1.114(e).

1. THE STATUS OF THE APPLICATION IS AS FOLLOWS:

- a. ☒ Pending (no review proceedings active)
- (1) ☒ An Action was mailed by the Office on October 15, 2004, as to which no appeal under 37 CFR § 1.191 has been filed and
- _____ a response under 37 CFR § 1.116 was mailed on
- _____ via Express Mail
- _____ with certificate of mailing under 37 CFR § 1.8
- ☒ that Action was a Final Rejection, the finality of which is to be withdrawn by this Request
- _____ an appeal or civil action under 35 U.S.C. 141, 145 or 146 has been terminated
- (2) _____ Allowed: the Notice of Allowance was mailed by the Office on
- _____ the Issue Fee has not been paid
- _____ the Issue Fee has been paid and a petition under 37 CFR § 1.313 was granted on
- b. _____ Pending (with review proceeding active)
- An appeal under 37 CFR § 1.191 has been filed. **Applicant(s) hereby withdraw that appeal and request reopening of the prosecution of the application.**

2. SUBMISSION(S) REQUIRED (check at least one)

**REQUEST FOR CONTINUED EXAMINATION (RCE)
TRANSMITTAL**

Application No. 09/692,747

- a. Previously submitted
- _____ Consider the amendments/reply under 37 CFR § 1.116 previously filed on
- _____ Consider the arguments in the Appeal or Reply Brief previously filed on
- _____ Other:
- b. Enclosed
- X Amendment/Reply
- _____ Affidavit(s)/Declaration(s)
- _____ Information Disclosure Statement
- _____ Documents under 37 CFR § 1.48
- X Petition for Extension of Time
- X Other: Copies of Information Disclosure Statements dated March 28, 2001, May 2, 2001, March 8, 2002 and August 6, 2003

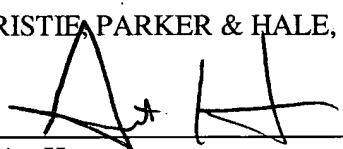
The Examiner is requested to telephone the undersigned promptly following receipt and initial review of the application in light of the Submissions(s) for the conduct of, or the scheduling of, a telephone interview in the application.

Please direct all correspondence to **CUSTOMER NUMBER 23363**. Direct telephone calls to 626/795-9900, **CHRISTIE, PARKER & HALE, LLP, P.O. Box 7068, Pasadena, CA 91109-7068**.

Respectfully submitted,

CHRISTIE PARKER & HALE, LLP

By



Art Hasan
Reg. No. 41,057
626/795-9900

SAH/amb

**REQUEST FOR CONTINUED EXAMINATION (RCE)
FEE CALCULATION SHEET**

Application No. 09/692,747

PART I — BASIC FEE			
BASIC FEE	Small Entity \$395.00	Large Entity \$790.00	\$790

PART II — ADDITIONAL CLAIMS (compared to application before RCE)						
	Claims Remaining After Amendment	Highest Number Previously Paid For	Number Extra Claims	Small Entity Rate	Large Entity Rate	FEE
Total Claims	45	45*	0	0 x \$25.00	0 x \$50.00	0
Independent Claims	4	4**	0	0 x \$100.00	0 x \$200.00	0
First Presentation of Multiple Dependent Claim				\$180.00	\$360.00	0
TOTAL CLAIMS FEE						\$0
List Independent Claims: 1, 16, 29 and 37						
* IF THE "HIGHEST NUMBER OF TOTAL CLAIMS PREVIOUSLY PAID FOR" IS LESS THAN 20, WRITE "20" IN THIS SPACE.						
** IF THE HIGHEST NUMBER PREVIOUSLY PAID OR IS 3 OR LESS, WRITE "3" IN THIS SPACE.						

1. **FEES** (The RCE fee under 37 CFR § 1.17(e) is required by 37 CFR § 1.114 when the RCE is filed.)
- Amount (total from Fee Calculation Sheet)
A check for \$790 is enclosed.
 - X The Commissioner is hereby authorized to charge any fees under 37 CFR 1.16 and 1.17 which may be required for this transaction to Deposit Account No. 03-1728. Please show our docket number with any charge or credit to our Deposit Account. A **duplicate copy hereof is enclosed.**
 - AMB PAS608694.1-*02/15/05 2:24 PM